

OLD DOMINION UNIVERSITY RESEARCH FOUNDATION

Property Control

Equipment Turn In / Transfer Request Form

This form is used to update department inventories by removing, adding, or updating items within departmental responsibility.

PLEASE RETURN FORM TO ODURF

INITIATING Dept. _____	Phone #: _____
Purchase Order #: _____	Project / Object Code: _____
Contact Person: _____	Date: _____

RECEIVING Dept. _____	
Budget Code: _____	Phone #: _____
Contact Person: _____	Date: _____

I wish to declare the following items be: *(must check one)*

- | | |
|---|---|
| <input type="checkbox"/> Turned into Property Control | <input type="checkbox"/> Transferred to another location / department |
| <input type="checkbox"/> Lost | <input type="checkbox"/> Stolen |
| <input type="checkbox"/> Other | |

Items	Tag #	Serial #	Model / Mfg	Condition

Condition: New, Good, Fair, Poor, Scrap

I hereby certify that the above is a true and complete statement regarding this request.

Initiating Contact Person

Initiating Director, Supervisor (Principal Investigator)

Receiving Contact Person

Property Control Supervisor

Date